

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 MAY 13 AM 9:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P99000035000

1. Corporation Name

BF Acquisition Group, I, Inc.

300037292223
05/25/04--01052--001 **1500.00

REINSTATEMENT

03-01

2. Principal Office Address

400 Hampton View Court

Suite, Apt. #, etc.

City & State

Alpharetta, GA

Zip
30004

Country
USA

3. Mailing Office Address

400 Hampton View Court

Suite, Apt. #, etc.

City & State

Alpharetta, GA

Zip
30004

Country
USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number
65-0913582

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

David M. Bovi, P.A.

Street Address (P.O. Box Number is Not Acceptable)

319 Clematis Street

Suite, Apt. #, Etc.

Suite 700

City

West Palm Beach,

State

FL

Zip Code

33401

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

[Signature]

Date

5/6/04

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P D	Bill Bosso	400 Hampton View Court	Alpharetta, GA 30004
D T	William R. Colucci	2501 Turk Blvd.	San Francisco, CA 94118
D	John W. Benton	400 Hampton View Court	Alpharetta, GA 30004
D	J.P. Baron, III	400 Hampton View Court	Alpharetta, GA 30004

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

[Signature] William J. Bosso

Date

770-777-6795
6 MAY 2004

Daytime Phone #

CR2E081 (01/04)